

ADOT USE ONLY

ARIZONA CRASH REPORT

REPORT ID

31.02

Agency Report Number

1 POLICE ONLY - FORWARD COPY TO
ADOT TRAFFIC RECORDS SECTION, 064R
206 S. 17TH AVE., PHOENIX, ARIZONA 85007-3233

YEAR

MONTH

DAY

HOUR

NCIC NO.

OFFICER ID NO.

1105252024100349542

1105250781

Total Number of Sheets 3

COMPLETE THE TRUCK/BUS SUPPLEMENT IF ANY (circle) AND ANY (diamond) ARE CHECKED

2 Total Units 2 Total Injuries 3 Total Fatalities 0 Estimated Total Damage Compared To \$1,000 Limit: Over Under 0 Fatal 0 Hit-Run Unit # 0 Person Transported for Immediate Medical Care? 0 Tow Away of At Least One Vehicle from Scene? District or Grid No.

3 On Highway/Road/Street E 22ND ST
Intersecting Street/Road/M.P. or R.P. S ALVERNON Way
Location: Inside City TUCSON County PIMA
North East Plus Distance Measured Miles
South West Minus Approximate Feet

Safety Devices (SD) 5 - Helmet Used 6 - Air Bag Deployed 7 - Air Bag Deployed/Shoulder-Lap Belt 97 - Other 99 - Unknown
Injury Severity (IS) 1 - No Injury 2 - Possible Injury 3 - Non Incapacitating Injury 4 - Incapacitating Injury 5 - Fatal Injury 99 - Unknown/Not Reported
Seating Position 31 21 11 32 22 12 33 23 13 38 28 18 18 - Front Seat - Other (Child in Lap) 28 or 38 - Additional passenger in vehicle by row 51 - In enclosed or cargo area 52 - In unenclosed passenger/cargo area 55 - Riding on Vehicle Exterior 99 - Unknown

1 State Class End. DL # No Valid License/Permit Driver Driverless Pedestrian Pedalcyclist Name (First, Middle, Last) EVELYN M GRUBBY Suffix Sex F
Restrictions Address 2640 S CORTLAND LN * 22 Tucson AZ 85713 Telephone Number 520 623 9793
Date of Birth 4/18/26 Same as Driver Owner/Carrier Name Address City State Zip Code

TRAFFIC UNIT NO. 1 Color BLU Vehicle Year 1995 Make CADU Model APPROVA Body Style SW Plate Number LHC 3AHA State AZ Plate Mo/Yr 1/12 VIN 1GNDM19W6SB229140 Trailer (Other Unit) Plate No. State Year GW/GWR (Rated) Greater Than 10k pounds? Yes No
Safety Devices 3 Injury Severity 2 Posted Speed Limit 35 Ofc Est. Speed 10 Transported To/By SW AMB.
Removed to (Address/Storage Location Identifier) GAN'S Disabled Not Disabled Removed by GAKY'S Orders of DRIVER
Insurance Company STATE FARM Telephone Number 520 747-7777 Policy Number 522 4886-001-000 Exp. Date 10/11

2 State Class End. DL # No Valid License/Permit Driver Driverless Pedestrian Pedalcyclist Name (First, Middle, Last) ANGEL A HIGHTOWER Suffix Sex M
Restrictions Address 3241 E 24TH TUCSON, AZ City State Zip Code Telephone Number 520 331-2719
Date of Birth 11/21/77 Same as Driver Owner/Carrier Name Address City State Zip Code
Color BLK Vehicle Year 2000 Make FORD Model EXP Body Style (LL) Plate Number 4DSW AMB 2718 State AZ Plate Mo/Yr 9/11 VIN 1FNU42514ED73543 Trailer (Other Unit) Plate No. State Year GW/GWR (Rated) Greater Than 10k pounds? Yes No
Safety Devices 3 Injury Severity 1 Posted Speed Limit 35 Ofc Est. Speed 35 Transported To/By N/A
Removed to (Address/Storage Location Identifier) DRIVER Disabled Not Disabled Removed by DRIVER Orders of
Insurance Company STATE FARM Telephone Number Policy Number 158 2182 002 038 Exp. Date 10/11

TRAFFIC UNIT NO. 4 State Class End. DL # No Valid License/Permit Driver Driverless Pedestrian Pedalcyclist Name (First, Middle, Last)
Restrictions Address City State Zip Code Telephone Number
Date of Birth Same as Driver Owner/Carrier Name Address City State Zip Code
Color Vehicle Year Make Model Body Style Plate Number State Plate Mo/Yr
VIN Trailer (Other Unit) Plate No. State Year GW/GWR (Rated) Greater Than 10k pounds? Yes No
Safety Devices Injury Severity Posted Speed Limit Ofc Est. Speed Transported To/By
Removed to (Address/Storage Location Identifier) Disabled Not Disabled Removed by Orders of
Insurance Company Telephone Number Policy Number Exp. Date

5 PASSENGERS Unit # Seat Pos SD IS Name Address City State Zip Code Telephone No. D.O.B./Age Sex
2 13 3 1 ELIZABETH HIGHTOWER 3241 E 24TH TUCSON, AZ 85713 331-2719 8/22/77 F
2 22 3 1 HALDI HIGHTOWER S-A-A 331-2719 2/17/77 F
2 23 3 1 ANGEL HIGHTOWER JR S-A-A 331-2719 10/26/04 M
2 21 3 1 CAROLYN HIGHTOWER S-A-A 331-2719 1/16/07 F

6 OC Owner's Name Address (or Bar Code ID Number) City State Zip Code Telephone Number
Property Damaged (Other than Vehicles) Block 31, Event 29-49 Owner Code 1 - Private 2 - Public Utility 3 - Federal Government 4 - State of Arizona 5 - County in Arizona 6 - City in Arizona 7 - Tribal Nation 99 - Unknown Inventory Tag No.

7 Photos Taken Yes No Photographer's Name, ID Number and Agency Number Invest. At Scene Yes No Date Invest. 052511 2034 Time Invest. 31953 Fire/EMS Incident No. 082511
Officer's Name Badge # MORIN #49542 Supervisor's Signature Agency Name JPD Date Completed



WITNESSES		Name	Address	City	State	Zip Code	Telephone Number	D.O.B./Age	
8									
9	CITATION CHARGES	UNIT #	A.R.S. NO. OR CITY CODE	UNIT #	A.R.S. NO. OR CITY CODE	BLOCKS 10 - 24: CHECK ONLY ONE OR ONE BLOCK PER UNIT UNLESS NOTED			
		1	28-772						
		1	28-31514						
10 - LIGHT CONDITION				17 - MANNER OF CRASH IMPACT				21 - CONDITION INFLUENCING Driver/Ped/Cyclist UP TO TWO CHOICES PER UNIT	
<input type="checkbox"/> 1 DAYLIGHT <input type="checkbox"/> 2 DAWN <input type="checkbox"/> 3 DUSK <input checked="" type="checkbox"/> 4 DARK-LIGHTED <input type="checkbox"/> 5 DARK-NOT LIGHTED <input type="checkbox"/> 6 DARK-UNKNOWN LIGHTING				<input type="checkbox"/> 1 SINGLE VEHICLE <input type="checkbox"/> 2 ANGLE (front to side) (other than left turn) <input checked="" type="checkbox"/> 3 LEFT TURN <input type="checkbox"/> 4 REAR END (front-to-rear) <input type="checkbox"/> 5 HEAD ON (front-to-front) (other than left turn) <input type="checkbox"/> 6 SIDESWIPE, SAME DIRECTION <input type="checkbox"/> 7 SIDESWIPE, OPPOSITE DIRECTION <input type="checkbox"/> 8 REAR TO SIDE <input type="checkbox"/> 9 REAR TO-REAR <input type="checkbox"/> 97 OTHER <input type="checkbox"/> 99 UNKNOWN				<input checked="" type="checkbox"/> 0 NO APPARENT INFLUENCE <input type="checkbox"/> 1 ILLNESS <input type="checkbox"/> 2 PHYSICAL IMPAIRMENT <input type="checkbox"/> 3 FELL ASLEEP/FATIGUED <input type="checkbox"/> 4 ALCOHOL <input type="checkbox"/> 5 DRUGS <input type="checkbox"/> 6 MEDICATIONS CHECK ONE IF BLOCKS 4, 5, OR 6 CHECKED <input type="checkbox"/> A. NO TEST GIVEN <input type="checkbox"/> B. TEST GIVEN <input type="checkbox"/> C. TEST REFUSED <input type="checkbox"/> D. TESTING UNKNOWN <input type="checkbox"/> 97 OTHER <input type="checkbox"/> 99 UNKNOWN CONDITION	
11 - WEATHER CONDITIONS				18 - DIRECTION OF UNIT TRAVEL (Compass) BEFORE 1ST CRASH EVENT				22 - VIOLATIONS/BEHAVIOR UP TO TWO CHOICES PER UNIT	
<input checked="" type="checkbox"/> 1 CLEAR <input type="checkbox"/> 2 CLOUDY <input type="checkbox"/> 3 SLEET, HAIL (freezing rain/drizzle) <input type="checkbox"/> 4 RAIN <input type="checkbox"/> 5 SNOW <input type="checkbox"/> 6 SEVERE CROSSWINDS <input type="checkbox"/> 7 BLOWING SAND, SOIL, DIRT <input type="checkbox"/> 8 FOG, SMOG, SMOKE <input type="checkbox"/> 9 BLOWING SNOW <input type="checkbox"/> 97 OTHER <input type="checkbox"/> 99 UNKNOWN				<input checked="" type="checkbox"/> 1 NORTH <input type="checkbox"/> 2 SOUTH <input checked="" type="checkbox"/> 3 EAST <input type="checkbox"/> 4 WEST <input type="checkbox"/> 5 NORTHWEST <input type="checkbox"/> 6 NORTHEAST <input type="checkbox"/> 7 SOUTHWEST <input type="checkbox"/> 8 SOUTHEAST <input type="checkbox"/> 99 UNKNOWN				<input checked="" type="checkbox"/> 1 NO IMPROPER ACTION <input type="checkbox"/> 2 SPEED TOO FAST FOR CONDITIONS <input type="checkbox"/> 3 EXCEEDED LAWFUL SPEED <input type="checkbox"/> 4 FOLLOWED TOO CLOSELY <input type="checkbox"/> 5 RAN STOP SIGN <input type="checkbox"/> 6 DISREGARDED TRAFFIC SIGNAL <input checked="" type="checkbox"/> 7 MADE IMPROPER TURN <input type="checkbox"/> 8 DROVE/RODE IN OPPOSING TRAFFIC LANE <input type="checkbox"/> 9 KNOWINGLY OPERATED WITH FAULTY/MISSING EQUIPMENT <input type="checkbox"/> 10 REQUIRED MOTORCYCLE SAFETY EQUIPMENT NOT USED <input type="checkbox"/> 11 PASSED IN NO PASSING ZONE <input type="checkbox"/> 12 UNSAFE LANE CHANGE <input type="checkbox"/> 13 FAILED TO KEEP IN PROPER LANE <input type="checkbox"/> 14 DISREGARDED PAVEMENT MARKINGS <input type="checkbox"/> 15 OTHER UNSAFE PASSING <input type="checkbox"/> 16 INATTENTION/DISTRACTION <input type="checkbox"/> 17 DID NOT USE CROSSWALK <input type="checkbox"/> 18 WALKED ON WRONG SIDE OF ROAD <input type="checkbox"/> 19 ELECTRONIC COMMUNICATIONS DEVICE <input checked="" type="checkbox"/> 20 FAILED TO YIELD RIGHT-OF-WAY <input type="checkbox"/> 99 UNKNOWN	
12 - ROAD SURFACE CONDITION				19 - CONTRIBUTING CIRCUMSTANCES UP TO TWO CHOICES PER UNIT				23 - TRAFFIC UNIT MANEUVER/ACTION	
<input checked="" type="checkbox"/> 1 DRY <input type="checkbox"/> 2 WET <input type="checkbox"/> 3 SNOW <input type="checkbox"/> 4 SLUSH <input type="checkbox"/> 5 ICE/FROST <input type="checkbox"/> 6 WATER (standing, moving) <input type="checkbox"/> 7 SAND <input type="checkbox"/> 8 MUD, DIRT, GRAVEL <input type="checkbox"/> 9 OIL <input type="checkbox"/> 97 OTHER <input type="checkbox"/> 99 UNKNOWN				<input checked="" type="checkbox"/> 0 NO CONTRIBUTING CIRCUMSTANCE ENVIRONMENTAL <input type="checkbox"/> 1 GLARE <input type="checkbox"/> A. SUNLIGHT <input type="checkbox"/> B. HEADLIGHTS <input type="checkbox"/> 2 PHYSICAL OBSTRUCTION(S) <input type="checkbox"/> A. STOPPED/PARKED VEHICLE <input type="checkbox"/> B. MOVING VEHICLE <input type="checkbox"/> C. LOAD ON VEHICLE <input type="checkbox"/> D. TREE/SHRUB/BUSH ROAD <input type="checkbox"/> 3 ROAD SURFACE CONDITION <input type="checkbox"/> 4 DEBRIS <input type="checkbox"/> 5 WORK ZONE <input type="checkbox"/> A. LANE CLOSURE <input type="checkbox"/> B. LANE SHIFT/CLOSURE <input type="checkbox"/> C. WORK ON SHOULDER OR MEDIAN <input type="checkbox"/> D. INTERMITTENT OR MOVING WORK <input type="checkbox"/> E. OTHER <input type="checkbox"/> F. WORKERS PRESENT <input type="checkbox"/> 6 OBSTRUCTION IN ROADWAY <input type="checkbox"/> 7 CHANGING ROAD WIDTH <input type="checkbox"/> 8 NON HIGHWAY WORK MOTOR VEHICLE <input type="checkbox"/> 9 BRAKES <input type="checkbox"/> 10 STEERING <input type="checkbox"/> 11 SUSPENSION <input type="checkbox"/> 12 TIRES <input type="checkbox"/> 13 WHEELS <input type="checkbox"/> 14 LIGHTS (head, signal, tail) <input type="checkbox"/> 15 WINDOWS/WINDSHIELD <input type="checkbox"/> 16 MIRRORS <input type="checkbox"/> 17 WIPERS <input type="checkbox"/> 18 TRUCK COUPLING/TRAILER/HITCH/SAFETY CHAINS <input type="checkbox"/> 97 OTHER <input type="checkbox"/> 99 UNKNOWN				<input checked="" type="checkbox"/> 1 GOING STRAIGHT AHEAD <input type="checkbox"/> 2 SLOWING IN TRAFFICWAY <input type="checkbox"/> 3 STOPPED IN TRAFFICWAY <input checked="" type="checkbox"/> 4 MAKING LEFT TURN <input type="checkbox"/> 5 MAKING RIGHT TURN <input type="checkbox"/> 6 MAKING U TURN <input type="checkbox"/> 7 OVERTAKING/PASSING <input type="checkbox"/> 8 CHANGING LANES <input type="checkbox"/> 9 NEGOTIATING A CURVE <input type="checkbox"/> 10 BACKING <input type="checkbox"/> 11 AVOIDING VEHICLE/OBJECT/PED/CYCLIST <input type="checkbox"/> 12 ENTERING PARKING POSITION <input type="checkbox"/> 13 LEAVING PARKING POSITION <input type="checkbox"/> 14 PROPERLY PARKED <input type="checkbox"/> 15 IMPROPERLY PARKED <input type="checkbox"/> 16 DRIVERLESS MOVING VEHICLE <input type="checkbox"/> 17 CROSSING ROAD <input type="checkbox"/> 18 WAITING WITH TRAFFIC <input type="checkbox"/> 19 WAITING AGAINST TRAFFIC <input type="checkbox"/> 20 STANDING <input type="checkbox"/> 21 LYING <input type="checkbox"/> 22 GETTING ON/OFF VEHICLE <input type="checkbox"/> 23 WORKING ON/PUSHING VEHICLE <input type="checkbox"/> 24 WORKING ON ROAD <input type="checkbox"/> 97 OTHER <input type="checkbox"/> 99 UNKNOWN	
13 - ROAD GRADE				20 - TRAFFIC CONTROL DEVICE				24 - LOCATION OF PEDESTRIAN/CYCLIST	
<input checked="" type="checkbox"/> 1 LEVEL <input type="checkbox"/> 2 DOWNHILL <input type="checkbox"/> 3 UPHILL <input type="checkbox"/> 4 HILL/CREST <input type="checkbox"/> 5 SAG/DIP/BOTTOM <input type="checkbox"/> 99 UNKNOWN				<input type="checkbox"/> 0 NO CONTROLS <input checked="" type="checkbox"/> 1 SIGNAL <input type="checkbox"/> 2 STOP SIGN <input type="checkbox"/> 3 YIELD SIGN <input type="checkbox"/> 4 WARNING SIGN <input type="checkbox"/> 5 RAILROAD CROSSING DEVICE <input type="checkbox"/> 6 FLASHING TRAFFIC SIGNAL <input type="checkbox"/> 7 PERSON (law enforcement, crossing guard, flagger, etc.) <input type="checkbox"/> 97 OTHER <input type="checkbox"/> 99 UNKNOWN				<input type="checkbox"/> 1 MARKED CROSSWALK AT INTERSECTION <input type="checkbox"/> 2 AT INTERSECTION BUT NO CROSSWALK <input type="checkbox"/> 3 NON-INTERSECTION CROSSWALK <input type="checkbox"/> 4 DRIVEWAY ACCESS CROSSWALK <input type="checkbox"/> 5 SCHOOL CROSSWALK <input type="checkbox"/> 6 IN ROADWAY (not in crosswalk/intersection) <input type="checkbox"/> 7 MEDIAN (but not on shoulder) <input type="checkbox"/> 8 ISLAND <input type="checkbox"/> 9 SHOULDER <input type="checkbox"/> 10 SIDEWALK <input type="checkbox"/> 11 ROADSIDE <input checked="" type="checkbox"/> 12 OUTSIDE OF TRAFFICWAY <input type="checkbox"/> 13 DEDICATED BIKE LANE <input type="checkbox"/> 14 SHARED USE PATH <input type="checkbox"/> 15 INSIDE BUILDING <input type="checkbox"/> 97 OTHER <input type="checkbox"/> 99 UNKNOWN	
14 - RELATION TO JUNCTION				21 - LOCATION OF PEDESTRIAN/CYCLIST				25 - LOCATION OF PEDESTRIAN/CYCLIST	
<input type="checkbox"/> 0 NOT JUNCTION RELATED NON-CONTROLLED ACCESS AREA <input checked="" type="checkbox"/> 1 INTERSECTION (within) <input type="checkbox"/> 2 INTERSECTION-RELATED <input type="checkbox"/> 3 ENTRANCE/EXIT RAMP (rest areas) <input type="checkbox"/> 4 RAILWAY GRADE CROSSING <input type="checkbox"/> 5 MEDIAN CROSSOVER-RELATED <input type="checkbox"/> 6 FRONTAGE ROAD <input type="checkbox"/> 7 DRIVEWAY <input type="checkbox"/> 8 ALLEY ACCESS-RELATED <input type="checkbox"/> 9 UNKNOWN NON-INTERCHANGE CONTROLLED ACCESS AREA <input type="checkbox"/> 10 THRU ROADWAY <input type="checkbox"/> 11 INTERSECTION (within) <input type="checkbox"/> 12 INTERSECTION-RELATED <input type="checkbox"/> 13 ENTRANCE/EXIT RAMP <input type="checkbox"/> 14 FRONTAGE ROAD <input type="checkbox"/> 15 OTHER PART OF INTERCHANGE <input type="checkbox"/> 99 UNKNOWN				<input type="checkbox"/> 0 NOT JUNCTION RELATED <input type="checkbox"/> 1 INTERSECTION (within) <input type="checkbox"/> 2 INTERSECTION-RELATED <input type="checkbox"/> 3 ENTRANCE/EXIT RAMP (rest areas) <input type="checkbox"/> 4 RAILWAY GRADE CROSSING <input type="checkbox"/> 5 MEDIAN CROSSOVER-RELATED <input type="checkbox"/> 6 FRONTAGE ROAD <input type="checkbox"/> 7 DRIVEWAY <input type="checkbox"/> 8 ALLEY ACCESS-RELATED <input type="checkbox"/> 9 UNKNOWN NON-INTERCHANGE CONTROLLED ACCESS AREA <input type="checkbox"/> 10 THRU ROADWAY <input type="checkbox"/> 11 INTERSECTION (within) <input type="checkbox"/> 12 INTERSECTION-RELATED <input type="checkbox"/> 13 ENTRANCE/EXIT RAMP <input type="checkbox"/> 14 FRONTAGE ROAD <input type="checkbox"/> 15 OTHER PART OF INTERCHANGE <input type="checkbox"/> 99 UNKNOWN				<input type="checkbox"/> 0 NOT JUNCTION RELATED <input type="checkbox"/> 1 INTERSECTION (within) <input type="checkbox"/> 2 INTERSECTION-RELATED <input type="checkbox"/> 3 ENTRANCE/EXIT RAMP (rest areas) <input type="checkbox"/> 4 RAILWAY GRADE CROSSING <input type="checkbox"/> 5 MEDIAN CROSSOVER-RELATED <input type="checkbox"/> 6 FRONTAGE ROAD <input type="checkbox"/> 7 DRIVEWAY <input type="checkbox"/> 8 ALLEY ACCESS-RELATED <input type="checkbox"/> 9 UNKNOWN NON-INTERCHANGE CONTROLLED ACCESS AREA <input type="checkbox"/> 10 THRU ROADWAY <input type="checkbox"/> 11 INTERSECTION (within) <input type="checkbox"/> 12 INTERSECTION-RELATED <input type="checkbox"/> 13 ENTRANCE/EXIT RAMP <input type="checkbox"/> 14 FRONTAGE ROAD <input type="checkbox"/> 15 OTHER PART OF INTERCHANGE <input type="checkbox"/> 99 UNKNOWN	
15 - TYPE OF INTERSECTION				22 - LOCATION OF PEDESTRIAN/CYCLIST				26 - LOCATION OF PEDESTRIAN/CYCLIST	
<input checked="" type="checkbox"/> 1 FOUR-WAY INTERSECTION <input type="checkbox"/> 2 T-INTERSECTION <input type="checkbox"/> 3 Y-INTERSECTION <input type="checkbox"/> 4 INTER. AS PART OF INTERCHANGE <input type="checkbox"/> 5 TRAFFIC CIRCLE <input type="checkbox"/> 6 ROUNDABOUT <input type="checkbox"/> 7 FIVE POINT, OR MORE <input type="checkbox"/> 99 UNKNOWN				<input type="checkbox"/> 0 NOT JUNCTION RELATED <input type="checkbox"/> 1 INTERSECTION (within) <input type="checkbox"/> 2 INTERSECTION-RELATED <input type="checkbox"/> 3 ENTRANCE/EXIT RAMP (rest areas) <input type="checkbox"/> 4 RAILWAY GRADE CROSSING <input type="checkbox"/> 5 MEDIAN CROSSOVER-RELATED <input type="checkbox"/> 6 FRONTAGE ROAD <input type="checkbox"/> 7 DRIVEWAY <input type="checkbox"/> 8 ALLEY ACCESS-RELATED <input type="checkbox"/> 9 UNKNOWN NON-INTERCHANGE CONTROLLED ACCESS AREA <input type="checkbox"/> 10 THRU ROADWAY <input type="checkbox"/> 11 INTERSECTION (within) <input type="checkbox"/> 12 INTERSECTION-RELATED <input type="checkbox"/> 13 ENTRANCE/EXIT RAMP <input type="checkbox"/> 14 FRONTAGE ROAD <input type="checkbox"/> 15 OTHER PART OF INTERCHANGE <input type="checkbox"/> 99 UNKNOWN				<input type="checkbox"/> 0 NOT JUNCTION RELATED <input type="checkbox"/> 1 INTERSECTION (within) <input type="checkbox"/> 2 INTERSECTION-RELATED <input type="checkbox"/> 3 ENTRANCE/EXIT RAMP (rest areas) <input type="checkbox"/> 4 RAILWAY GRADE CROSSING <input type="checkbox"/> 5 MEDIAN CROSSOVER-RELATED <input type="checkbox"/> 6 FRONTAGE ROAD <input type="checkbox"/> 7 DRIVEWAY <input type="checkbox"/> 8 ALLEY ACCESS-RELATED <input type="checkbox"/> 9 UNKNOWN NON-INTERCHANGE CONTROLLED ACCESS AREA <input type="checkbox"/> 10 THRU ROADWAY <input type="checkbox"/> 11 INTERSECTION (within) <input type="checkbox"/> 12 INTERSECTION-RELATED <input type="checkbox"/> 13 ENTRANCE/EXIT RAMP <input type="checkbox"/> 14 FRONTAGE ROAD <input type="checkbox"/> 15 OTHER PART OF INTERCHANGE <input type="checkbox"/> 99 UNKNOWN	
16 - TRAFFIC WAY DESCRIPTION				23 - LOCATION OF PEDESTRIAN/CYCLIST				27 - LOCATION OF PEDESTRIAN/CYCLIST	
<input type="checkbox"/> 1 ONE WAY TRAFFICWAY <input type="checkbox"/> 2 TWO-WAY, NOT DIVIDED (no median present) <input type="checkbox"/> 3 TWO-WAY, (NOT DIVIDED) WITH A CONTINUOUS LEFT TURN LANE <input checked="" type="checkbox"/> 4 TWO-WAY, DIVIDED, UNPROTECTED (PAINTED - 4 FEET) MEDIAN <input type="checkbox"/> 5 TWO-WAY, DIVIDED, POSITIVE MEDIAN BARRIER <input type="checkbox"/> 99 UNKNOWN				<input type="checkbox"/> 0 NOT JUNCTION RELATED <input type="checkbox"/> 1 INTERSECTION (within) <input type="checkbox"/> 2 INTERSECTION-RELATED <input type="checkbox"/> 3 ENTRANCE/EXIT RAMP (rest areas) <input type="checkbox"/> 4 RAILWAY GRADE CROSSING <input type="checkbox"/> 5 MEDIAN CROSSOVER-RELATED <input type="checkbox"/> 6 FRONTAGE ROAD <input type="checkbox"/> 7 DRIVEWAY <input type="checkbox"/> 8 ALLEY ACCESS-RELATED <input type="checkbox"/> 9 UNKNOWN NON-INTERCHANGE CONTROLLED ACCESS AREA <input type="checkbox"/> 10 THRU ROADWAY <input type="checkbox"/> 11 INTERSECTION (within) <input type="checkbox"/> 12 INTERSECTION-RELATED <input type="checkbox"/> 13 ENTRANCE/EXIT RAMP <input type="checkbox"/> 14 FRONTAGE ROAD <input type="checkbox"/> 15 OTHER PART OF INTERCHANGE <input type="checkbox"/> 99 UNKNOWN				<input type="checkbox"/> 0 NOT JUNCTION RELATED <input type="checkbox"/> 1 INTERSECTION (within) <input type="checkbox"/> 2 INTERSECTION-RELATED <input type="checkbox"/> 3 ENTRANCE/EXIT RAMP (rest areas) <input type="checkbox"/> 4 RAILWAY GRADE CROSSING <input type="checkbox"/> 5 MEDIAN CROSSOVER-RELATED <input type="checkbox"/> 6 FRONTAGE ROAD <input type="checkbox"/> 7 DRIVEWAY <input type="checkbox"/> 8 ALLEY ACCESS-RELATED <input type="checkbox"/> 9 UNKNOWN NON-INTERCHANGE CONTROLLED ACCESS AREA <input type="checkbox"/> 10 THRU ROADWAY <input type="checkbox"/> 11 INTERSECTION (within) <input type="checkbox"/> 12 INTERSECTION-RELATED <input type="checkbox"/> 13 ENTRANCE/EXIT RAMP <input type="checkbox"/> 14 FRONTAGE ROAD <input type="checkbox"/> 15 OTHER PART OF INTERCHANGE <input type="checkbox"/> 99 UNKNOWN	

ARIZONA CRASH REPORT

REPORT ID

Agency Report Number

1	CONTINUED POLICE ONLY...FORWARD COPY TO ADOT TRAFFIC RECORDS SECTION, 064R 206 S. 17TH AVE. PHOENIX, ARIZONA 85007-3233	YEAR	MONTH	DAY	HOUR	NCIC NO.	OFFICER ID NO.	1105250781
		11	05	25	20	09	100349542	

25	VEHICLE DAMAGED AREA(S) - (CIRCLE UP TO THREE AREAS PER UNIT)																												
Unit #	1	2	3	4	5	6	7	8	0-NONE 10-UNDERCARRIAGE 97-OTHER 99-UNKNOWN	Unit #	1	2	3	4	5	6	7	8	0-NONE 10-UNDERCARRIAGE 97-OTHER 99-UNKNOWN	Unit #	1	2	3	4	5	6	7	8	0-NONE 10-UNDERCARRIAGE 97-OTHER 99-UNKNOWN

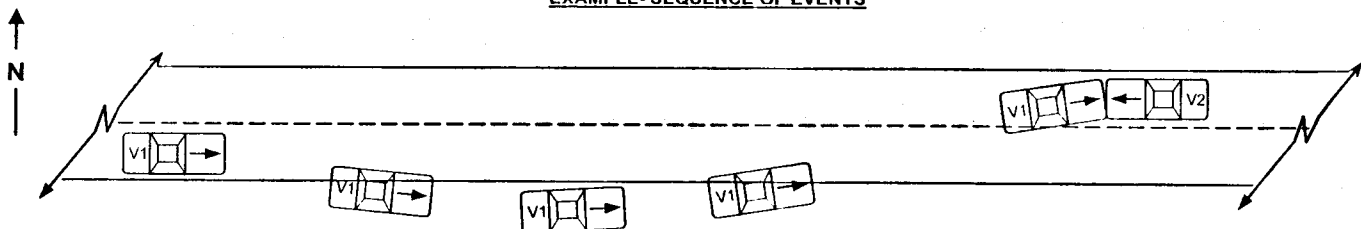
26	GLOBAL POSITION	Latitude:	Longitude:
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27 - ROADWAY ALIGNMENT	31 - SEQUENCE OF EVENTS
UNIT # 12	SEE EXAMPLE BELOW
<input checked="" type="checkbox"/> 1 - STRAIGHT <input type="checkbox"/> 2 - CURVE LEFT <input type="checkbox"/> 3 - CURVE RIGHT <input type="checkbox"/> 99 - UNKNOWN	UP TO FOUR CRASH EVENTS FOR EACH UNIT IN THE ORDER OF OCCURRENCE

28 - LANE	31 - SEQUENCE OF EVENTS (CONT.)						
Please enter unit's number and lane of travel before first crash event	COLLISION WITH FIXED OBJECT						
<table border="1"><tr><td>UNIT 1</td><td>UNIT 2</td><td>UNIT 3</td></tr><tr><td>1</td><td>1</td><td></td></tr></table>	UNIT 1	UNIT 2	UNIT 3	1	1		29 IMPACT ATTENUATOR/CRASH CUSHION 30 BRIDGE/OVERHEAD STRUCTURE 31 BRIDGE RAIL 32 CULVERT 33 CURB 34 DITCH 35 EMBANKMENT 36 GUARDRAIL FACE 37 GUARDRAIL END 38 CONCRETE TRAFFIC BARRIER 39 CABLE TRAFFIC BARRIER 40 OTHER TRAFFIC BARRIER 41 TREE, BUSH, STUMP (standing) 42 TRAFFIC SIGN SUPPORT 43 TRAFFIC SIGNAL SUPPORT 44 UTILITY POLE/LIGHT SUPPORT 45 OTHER POST, POLE, OR SUPPORT 46 FENCE 47 MAILBOX 48 BUILDING 49 OTHER FIXED OBJ. _____
UNIT 1	UNIT 2	UNIT 3					
1	1						
0 TWO-WAY CONTINUOUS LEFT TURN 1-9 1= FIRST LANE NEXT TO A MEDIAN THRU 9 10 CROSSWALK L1 THRU LX - LEFT TURN ONLY LANES (L1=1ST LEFT TURN AFTER MEDIAN/ CENTERLINE) R1 THRU RX - RIGHT TURN LANES (R1=1ST RIGHT TURN AFTER THROUGH LANES) BL DEDICATED BIKE LANE HOV HIGH OCCUPANCY VEHICLE 97 NON-ROADWAY 99 UNKNOWN	99 UNKNOWN						

29 - EJECTION	30 - EXTRICATION	31 - SEQUENCE OF EVENTS (CONT.)																												
0 NOT APPLICABLE 1 NOT EJECTED 2 EJECTED, PARTIALLY 3 EJECTED, TOTALLY 4 UNKNOWN DEGREE 99 UNKNOWN	0 NOT APPLICABLE 1 EXTRICATED 99 UNKNOWN	SEQUENCE OF EVENTS																												
Unit # and Seat Position from front page. Driver seat position = 11		<table border="1"><tr><th>UNIT</th><th>UNIT</th><th>UNIT</th><th></th></tr><tr><td></td><td></td><td></td><td>FIRST EVENT</td></tr><tr><td></td><td></td><td></td><td>SECOND EVENT</td></tr><tr><td></td><td></td><td></td><td>THIRD EVENT</td></tr><tr><td></td><td></td><td></td><td>FOURTH EVENT</td></tr></table>	UNIT	UNIT	UNIT					FIRST EVENT				SECOND EVENT				THIRD EVENT				FOURTH EVENT								
UNIT	UNIT	UNIT																												
			FIRST EVENT																											
			SECOND EVENT																											
			THIRD EVENT																											
			FOURTH EVENT																											
<table border="1"><tr><th>Unit #</th><th>Seat Pos</th><th>Ejection</th><th>Extrication</th></tr><tr><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td></tr></table>	Unit #	Seat Pos	Ejection	Extrication																									16 MOTOR VEHICLE IN TRANSPORT 17 PEDESTRIAN 18 PEDALCYCLE 19 RAILWAY VEHICLE (TRAIN, ENGINE) 20 LIGHT RAILWAY/RAILCAR VEHICLE 21 ANIMAL, WILD-NON GAME 22 ANIMAL, WILD-GAME 23 ANIMAL-PET 24 ANIMAL-LIVESTOCK 25 PARKED MOTOR VEHICLE 26 WORK ZONE/MAINT. EQUIP. 27 STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY ANOTHER VEHICLE 28 OTHER NON-FIXED OBJ. _____	
Unit #	Seat Pos	Ejection	Extrication																											

EXAMPLE - SEQUENCE OF EVENTS



VEHICLE 1-SEQUENCE OF EVENTS

- 11- RAN OFF ROAD RIGHT
- 14- CROSS CENTERLINE
- 16- MOTOR VEHICLE IN TRANSPORT

VEHICLE 2-SEQUENCE OF EVENTS

- 16- MOTOR VEHICLE IN TRANSPORT

SEQUENCE OF EVENTS			
UNIT 1	UNIT 2	UNIT 3	
11	16		FIRST EVENT
14			SECOND EVENT
16			THIRD EVENT
			FOURTH EVENT

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1

CONTINUED

POLICE ONLY—FORWARD COPY TO
ADOT TRAFFIC RECORDS SECTION, 064R
206 S. 17TH AVE., PHOENIX, ARIZONA 85007-3233

YEAR

MONTH

DAY

HOURL

NCIC NO.

OFFICER ID NO.

11 05 25 20 24 1003 49542

110525 0781

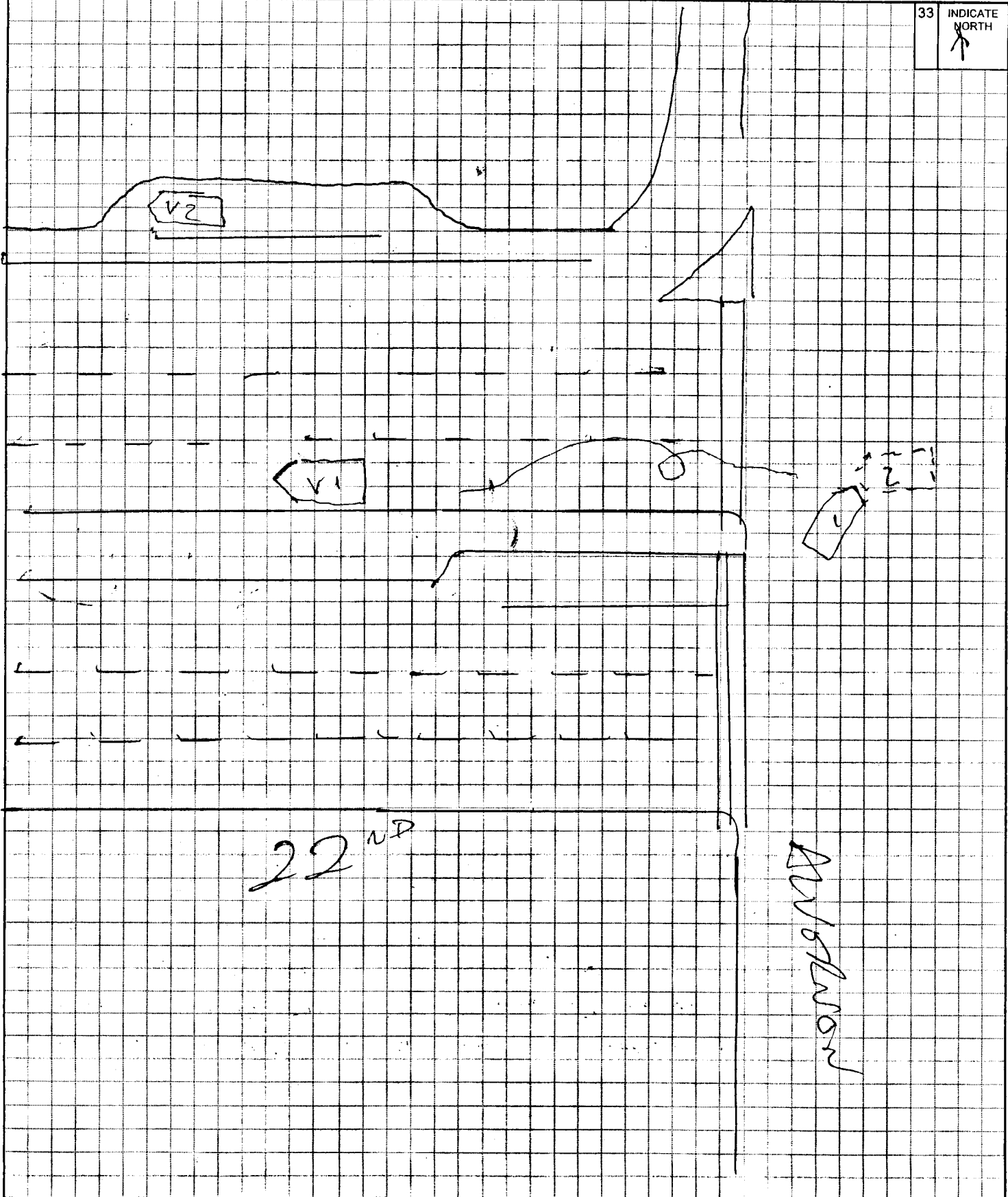
32

CRASH DIAGRAM

☒ MEASUREMENTS ARE APPROXIMATE AND NOT TO SCALE
☐ MEASUREMENTS ARE SCALED (SCALE =)

33

INDICATE
NORTH



ARIZONA CRASH REPORT		REPORT ID						Agency Report Number	
CONTINUED POLICE ONLY—FORWARD COPY TO ADOT TRAFFIC RECORDS SECTION, 064R 206 S. 17TH AVE., PHOENIX, ARIZONA 85007-3233		YEAR	MONTH	DAY	HOUR	NCIC NO.	OFFICER ID NO.		
		1	10	25	2024	100349542	110525 0781		

34	NARRATIVE	Describe what happened
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SPOKE TO DRIVER OF VEH #1, IDENTIFIED BY HER EXPIRED AZDL AS EVELYN GRUBBY. THE FIRST THING SHE STATED WAS THAT SHE WAS LOST. SHE STATED SHE WAS EIB ON 22ND MAKING A N/S ~~TURN~~ ONTO ALVORN RD. SHE COULDN'T REMEMBER IF THE LIGHT WAS RED/YELLOW OR GREEN.

SPOKE TO DRIVER OF VEHICLE #2, IDENTIFIED AS ANGEL HIGGINS BY HIS AZDL. STATED HE WAS W/B ON 22 IN #1 LANE. HE STATED THAT HE WAS NO MORE THAN 10' FROM THE TRAFFIC SIGNAL WHEN IT TURNED YELLOW, PROCEEDED THRU INTERSECTION AND WAS STRUCK BY VEH #1.

ADDITIONAL PASSENGERS	Unit #	Seat Pos	SD	IS	Name	Address	City	State	Zip Code	Telephone No.	D.O.B./Age	Sex
	1	13	3	2	DEBORAH V. MILLER	3150 N FLORENCE WELLS #24	AVENUE	AZ	85705	520 289-2722	9/2/45	F
	1	23	3	2	FERRY GRUBBY	2640 S CONCORD RD W #22	TULSA	AZ	85713	520 623 9793	10/17/50	F
ADDITIONAL WITNESSES	Name	Address	City	State	Zip Code	Telephone Number	D.O.B./Age					